

## B1 (Official Form 1) (1/08)

United States Bankruptcy Court District of Oregon						Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): <b>Stayton SW Assisted Living, L.L.C.</b>				Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>DBA Lakeside Assisted Living Community</b>				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):			
Last four digits of Social Security or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>91-1842496</b>				Last four digits of Social Security or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):			
Street Address of Debtor (No. & Street, City, and State): <b>2201 3rd Avenue Stayton, OR 97383</b> <div style="border: 1px solid black; padding: 2px; width: fit-content; float: right;">ZIP CODE <b>97383-0000</b></div>				Street Address of Joint Debtor (No. & Street, City, and State): <div style="border: 1px solid black; padding: 2px; width: fit-content; float: right;">ZIP CODE</div>			
County of Residence or of the Principal Place of Business: <b>Marion</b>				County of Residence or of the Principal Place of Business:			
Mailing Address of Debtor (if different from street address): <b>c/o J. Wallace Gutzler POB 3006 Salem, OR 97302-0006</b> <div style="border: 1px solid black; padding: 2px; width: fit-content; float: right;">ZIP CODE <b>97302-0006</b></div>				Mailing Address of Joint Debtor (if different from street address): <div style="border: 1px solid black; padding: 2px; width: fit-content; float: right;">ZIP CODE</div>			
Location of Principal Assets of Business Debtor (if different from street address above):							
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check one box.)  <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Chapter 7  <input type="checkbox"/> Chapter 9  <input checked="" type="checkbox"/> Chapter 11  <input type="checkbox"/> Chapter 12  <input type="checkbox"/> Chapter 13         </div> <div> <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding   <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding         </div> </div> <hr/> <b>Nature of Debts</b> (Check one box)  <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."         <input checked="" type="checkbox"/> Debts are primarily business debts.       </div>			
<b>Filing Fee</b> (Check one box.)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				<b>Chapter 11 Debtors</b>  <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000 <hr style="border-top: 1px dashed black;"/> <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).			
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.							THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> 1-49         <input checked="" type="checkbox"/> 50-99         <input type="checkbox"/> 100-199         <input type="checkbox"/> 200-999         <input type="checkbox"/> 1,000-5,000         <input type="checkbox"/> 5001-10,000         <input type="checkbox"/> 10,001-25,000         <input type="checkbox"/> 25,001-50,000         <input type="checkbox"/> 50,001-100,000         <input type="checkbox"/> OVER 100,000       </div>							
Estimated Assets <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> \$0 to \$50,000         <input type="checkbox"/> \$50,001 to \$100,000         <input type="checkbox"/> \$100,001 to \$500,000         <input type="checkbox"/> \$500,001 to \$1 million         <input checked="" type="checkbox"/> \$1,000,001 to \$10 million         <input type="checkbox"/> \$10,000,001 to \$50 million         <input type="checkbox"/> \$50,000,001 to \$100 million         <input type="checkbox"/> \$100,000,001 to \$500 million         <input type="checkbox"/> \$500,000,001 to \$1 billion         <input type="checkbox"/> More than \$1 billion       </div>							
Estimated Debts <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> \$0 to \$50,000         <input type="checkbox"/> \$50,001 to \$100,000         <input type="checkbox"/> \$100,001 to \$500,000         <input type="checkbox"/> \$500,001 to \$1 million         <input checked="" type="checkbox"/> \$1,000,001 to \$10 million         <input type="checkbox"/> \$10,000,001 to \$50 million         <input type="checkbox"/> \$50,000,001 to \$100 million         <input type="checkbox"/> \$100,000,001 to \$500 million         <input type="checkbox"/> \$500,000,001 to \$1 billion         <input type="checkbox"/> More than \$1 billion       </div>							

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Stayton SW Assisted Living, L.L.C.</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed: <b>- None -</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor: <b>- See Attachment -</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b). X _____ Signature of Attorney for Debtor(s)                      Date	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input checked="" type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> <i>Check all applicable boxes.</i>  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="margin-left: 100px;">           _____            (Name of landlord that obtained judgment)         </div> <div style="margin-left: 100px;">           _____            (Address of landlord)         </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.  <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>Stayton SW Assisted Living, L.L.C.</b>
<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.          [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> _____          Signature of Debtor</p> <p><b>X</b> _____          Signature of Joint Debtor</p> <p>_____          Telephone Number (If not represented by attorney)</p> <p>_____          Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p><b>X</b> _____          Signature of Foreign Representative</p> <p>_____          Printed Name of Foreign Representative</p> <p>_____          Date</p>
<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p><b>X /s/ Leon Simson</b> _____          Signature of Attorney for Debtor(s)  <b>Leon Simson OSB No. 75342</b> _____          Printed Name of Attorney for Debtor(s)  <b>Tonkon Torp LLP</b> _____          Firm Name  <b>1600 Pioneer Tower</b> _____  <b>888 SW Fifth Ave</b> _____  <b>Portland, OR 97204-2099</b> _____          Address  <b>503-802-2067 Fax: 503-972-3767</b> _____          Telephone Number  <b>December 1, 2008</b> _____          Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official form 19 is attached.</p> <p>_____          Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____          Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)</p> <p>_____          Address</p> <p><b>X</b> _____          Date</p> <p>_____          Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.          The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X /s/ Jon M. Harder</b> _____          Signature of Authorized Individual  <b>Jon M. Harder</b> _____          Printed Name of Authorized Individual  <b>Manager</b> _____          Title of Authorized Individual  <b>December 1, 2008</b> _____          Date</p>	

In re Stayton SW Assisted Living, L.L.C.

Debtor(s)

Case No. \_\_\_\_\_

**FORM 1. VOLUNTARY PETITION****Pending Bankruptcy Cases Filed Attachment**

<u>Name of Debtor / District</u>	<u>Case No. / Relationship</u>	<u>Date Filed / Judge</u>
Nashville Senior Living, LLC Middle District of Tennessee, Nashville Division	08-07254 Affiliate	08/17/08 Judge Paine
Anderson Senior Living Property, LLC Middle District of Tennessee, Nashville Division	08-07255 Affiliate	08/17/08 Judge Paine
Charlotte Oakdale Property, LLC Middle District of Tennessee, Nashville Division	08-07256 Affiliate	08/17/08 Judge Paine
Greensboro Oakdale Property, LLC Middle District of Tennessee, Nashville Division	08-07257 Affiliate	08/17/08 Judge Paine
Mt. Pleasant Oakdale I Property, LLC Middle District of Tennessee, Nashville Division	08-07258 Affiliate	08/17/08 Judge Paine
Mt. Pleasant Oakdale II Property, LLC Middle District of Tennessee, Nashville Division	08-07259 Affiliate	08/17/08 Judge Paine
Pinehurst Oakdale Property, LLC Middle District of Tennessee, Nashville Division	08-07260 Affiliate	08/17/08 Judge Paine
Winston-Salem Oakdale Property, LLC Middle District of Tennessee, Nashville Division	08-07261 Affiliate	08/17/08 Judge Paine
Century Fields Retirement and Assisted Living Community, LLC Middle District of Tennessee, Nashville Division	08-07338 Affiliate	08/19/08 Judge Paine
Briarwood Retirement and Assisted Living Community, LLC Middle District of Tennessee, Nashville Division	08-07339 Affiliate	08/19/08 Judge Paine
Portland Senior Living, LLC Oregon	08-36630 Affiliate	12/1/08 Judge Brown

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF OREGON

In re  
Stayton SW Assisted Living, L.L.C.

) Case No. \_\_\_\_\_

)

)

)

**EXHIBIT "C-1"**

Debtor(s)

) [NOTE: Must be FULLY completed by ALL debtors

) and attached to ALL copies of the Petition.]

**(NOTE: You must answer ALL questions. Attach additional sheets if necessary. Use of "UNKNOWN" is NOT acceptable!)**

1. DESCRIBE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION:

**NONE**

2. Street address and description of principal assets (note property):

**2201 3rd Avenue**

**Stayton OR 97383-0000**

3. **The BANKRUPTCY DOCUMENT PREPARER DECLARATION below has been completed for any person who helped, for compensation, prepare any of the bankruptcy papers if the debtor does not have an attorney.**

I declare under penalty of perjury that the above information provided in this Exhibit "C-1" is true and correct.

DATE: December 1, 2008

/s/ Jon M. Harder

(503) 375-9016

Debtor's Signature

Phone #

Joint Debtor's Signature

**BANKRUPTCY DOCUMENT PREPARER DECLARATION**

**I, the undersigned, declare under penalty of perjury that (1) neither I, nor anyone else listed herein, collected or received any payment from or on behalf of the debtor for court fees in connection with filing the petition; (2) I have received \$\_\_\_\_\_ from or on behalf of the debtor within the previous 12 month period; (3) \$\_\_\_\_\_ is the unpaid fee charged to the debtor; and (4) the following is true and accurate about myself and any other assistants:**

Individual Name and Firm (Type or Print): \_\_\_\_\_

Address (Type or Print): \_\_\_\_\_

Last 4 digits of Social Security Number of all OTHER individuals who prepared or assisted in the preparation of these bankruptcy documents: \_\_\_\_\_

Signature: \_\_\_\_\_ Last 4 digits of Social Security #: \_\_\_\_\_ Phone #: \_\_\_\_\_

**[NOTE: Penalties up to \$500 per item may be assessed for omission of any required information (11 USC §110; 18 USC §156) and Fed. Bankruptcy Rule 1006 prohibits further payment to any person for services until the court filing fees are paid in full.]**

EXHIBIT C-1 (8/8/08)

**United States Bankruptcy Court  
District of Oregon**

In re Stayton SW Assisted Living, L.L.C.

Debtor(s)

Case No.

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<b>amount determined in accordance with hourly rates as approved by the Court</b>
Prior to the filing of this statement I have received.....	\$	<b>58,333.33</b>
Balance Due.....	\$	<b>to be determined by Order of the Court</b>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
  - e. [Other provisions as needed]

**General representation of Debtor in regard to the Ch. 11 case.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Certain contemplated adversary proceedings which debtor may wish to prosecute on a contingent fee basis.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: December 1, 2008

/s/ Leon Simson

**Leon Simson OSB No. 75342**

**Tonkon Torp LLP**

**1600 Pioneer Tower**

**888 SW Fifth Ave**

**Portland, OR 97204-2099**

**503-802-2067 Fax: 503-972-3767**

**leon.simson@tonkon.com**

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court**  
**District of Oregon**

In re Stayton SW Assisted Living, L.L.C.

Debtor(s)

Case No. \_\_\_\_\_

Chapter 11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Liberty Mutual Insurance Attn: Tina Parrett 8430 W Bryn Mawr Ave, 3rd Chicago, IL 61631	Liberty Mutual Insurance Attn: Tina Parrett 8430 W Bryn Mawr Ave, 3rd Chicago, IL 61631 Telephone: 541-687-4799 Fax: 541-687-4718	Trade Debt		21,926.31
Sysco Food Services of Portland Attn: Greg Wolf Acct #356964 26250 SW Pkwy Center Dr Wilsonville, OR 97070	Sysco Food Services of Portland Attn: Greg Wolf Acct #356964 26250 SW Pkwy Center Dr Wilsonville, OR 97070 Telephone: 503-682-4869 Fax: 503-682-6699	Trade Debt		20,524.84
Alliance Insurance Group Attn: Tina Parrett 911 Country Club Rd # 340 Eugene, OR 97401	Alliance Insurance Group Attn: Tina Parrett 911 Country Club Rd # 340 Eugene, OR 97401 Telephone: 541-687-4799 Fax: 541-687-4718	Trade Debt		17,473.73
Capital Premium Finance Attn: Sarah Bush ACCT#CAP-076343 POB 1020 Draper, UT 84020	Capital Premium Finance Attn: Sarah Bush ACCT#CAP-076343 POB 1020 Draper, UT 84020 Telephone: 800-767-0705 Fax: 800-700-3170	Trade Debt		4,392.19

B4 (Official Form 4) (12/07) - Cont.

In re **Stayton SW Assisted Living, L.L.C.**

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
OHCA Attn: Linda Kirschbaum 11740 SW 68th Pkwy # 250 Portland, OR 97223-9062	OHCA Attn: Linda Kirschbaum 11740 SW 68th Pkwy # 250 Portland, OR 97223-9062 Telephone: 503-726-5260 Fax: 503-726-5259	Trade Debt		3,329.16
Former Resident #SSWAL-1 Address Redacted	Former Resident #SSWAL-1 Address Redacted	Resident Refund		2,685.62
TruGreen Landcare Attn: Cheri Rawlings POB 100186 Pasadena, CA 91189-0186	TruGreen Landcare Attn: Cheri Rawlings POB 100186 Pasadena, CA 91189-0186 Telephone: 541-928-1283 Fax: 541-928-1182	Trade Debt		2,083.00
Former Resident #SSWAL-2 Address Redacted	Former Resident #SSWAL-2 Address Redacted	Resident Refund		1,699.63
Former Resident #SSWAL-3 Address Redacted	Former Resident #SSWAL-3 Address Redacted	Resident Refund		1,510.84
Illustratus Attn: Adrian Robertson 10983 Granada Ln Overland Park, KS 66211	Illustratus Attn: Adrian Robertson 10983 Granada Ln Overland Park, KS 66211 Telephone: 913-754-4200 Fax: 913-754-4239	Trade Debt		1,426.15



B4 (Official Form 4) (12/07) - Cont.

In re **Stayton SW Assisted Living, L.L.C.**

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Grove Mueller and Swank PC Attn: Vicki Holland POB 2122 Salem, OR 97308-2122	Grove Mueller and Swank PC Attn: Vicki Holland POB 2122 Salem, OR 97308-2122 Telephone: 503-581-7788 Fax: 503-581-0152	Trade Debt		1,300.00
C and D Landscape Co Attn: Isaac Kearns 16800 NE McDougall Rd Dayton, OR 97114	C and D Landscape Co Attn: Isaac Kearns 16800 NE McDougall Rd Dayton, OR 97114 Telephone: 503-864-3551 Fax: 503-864-4428	Trade Debt		1,005.00
Medline Industries Inc Attn: Brian Koci Acct #1161408 - Dept 1080 POB 121080 Dallas, TX 75312-1080	Medline Industries Inc Attn: Brian Koci Acct #1161408 - Dept 1080 POB 121080 Dallas, TX 75312-1080 Telephone: 800-388-2147 Fax: 847-949-3180	Trade Debt		957.25
NW Natural Gas Attn: Accounts Receivable Acct # 1048887-2 POB 6017 Portland, OR 97228-6017	NW Natural Gas Attn: Accounts Receivable Acct # 1048887-2 POB 6017 Portland, OR 97228-6017 Telephone: 503-721-2512 Fax: 503-220-2584	Trade Debt		900.81
The Home Depot Supply Attn: Sonya Norton Acct # 1504007 POB 509058 San Diego, CA 92150-9058	The Home Depot Supply Attn: Sonya Norton Acct # 1504007 POB 509058 San Diego, CA 92150-9058 Telephone: 800-798-8888 Fax: 800-930-4930	Trade Debt		858.75
Former Resident #SSWAL-4 Address Redacted	Former Resident #SSWAL-4 Address Redacted	Resident Refund		711.27

B4 (Official Form 4) (12/07) - Cont.

In re **Stayton SW Assisted Living, L.L.C.**

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Otis Elevator Co Attn: Tina Cust #394006 – Contract #SPS07162 POB 73579 Chicago, IL 60673-7579	Otis Elevator Co Attn: Tina Cust #394006 – Contract #SPS07162 POB 73579 Chicago, IL 60673-7579 Telephone: 503-639-7045 Fax: 503-597-3668	Trade Debt		702.18
Allied Waste Attn: Accounts Receivable Acct # 3-0456-3006678 POB 608 Woodburn, OR 97071	Allied Waste Attn: Accounts Receivable Acct # 3-0456-3006678 POB 608 Woodburn, OR 97071 Telephone: 503-981-1278 Fax: 503-982-7930	Trade Debt		633.90
Mt Hood Solutions Attn: Mike Mulfur Acct #000889 14546 N Lombard St Portland, OR 97203-6462	Mt Hood Solutions Attn: Mike Mulfur Acct #000889 14546 N Lombard St Portland, OR 97203-6462 Telephone: 503-227-3505 Fax: 503-225-9143	Trade Debt		626.35
Direct Supply Attn: Kim Stuh POB 88201 Milwaukee, WI 53288	Direct Supply Attn: Kim Stuh POB 88201 Milwaukee, WI 53288 Telephone: 800-634-7338 Fax: 800-250-1961	Trade Debt		426.90

B4 (Official Form 4) (12/07) - Cont.

In re Stayton SW Assisted Living, L.L.C.  
Debtor(s)

Case No. \_\_\_\_\_

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
(Continuation Sheet)

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Manager of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date December 1, 2008

Signature /s/ Jon M. Harder  
**Jon M. Harder**  
**Manager**

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

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**TONKON TORP LLP**  
1600 Pioneer Tower  
888 S.W. Fifth Avenue  
Portland, OR 97204

Attorneys for Debtor

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF OREGON

In re	)	Case No.
	)	
Stayton SW Assisted Living, L.L.C., dba	)	<b>CERTIFICATE OF SERVICE OF</b>
Lakeside Assisted Living Community,	)	<b>LIST OF CREDITORS HOLDING</b>
	)	<b>20 LARGEST UNSECURED</b>
Debtor.	)	<b>CLAIMS ON THE U.S. TRUSTEE</b>

I hereby certify that I served (1) a copy of the **LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**, (2) pre-addressed, stamped envelopes for the debtor, debtor's attorney, and a contact person for each creditor on the List, and (3) this Certificate of Service on the U.S. Trustee at 620 S.W. Main Street, Room 213, Portland, OR 97205 by mailing a copy thereof in a sealed, first-class postage prepaid envelope on the date set forth below.

DATED this 1st day of December, 2008.

TONKON TORP LLP

By /s/ Leon Simson

Leon Simson, OSB No. 753429  
Albert N. Kennedy, OSB No. 821429  
Timothy J. Conway, OSB No. 851752  
Attorneys for Debtor

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